Case 19-30602 Doc 5 Filed 03/11/19 Entered 03/11/19 16:22:08 Desc Main Page 1 of //2

	170(411115111	FAUE I UI 4/	
rmation to identify your	case:		
Nicholas D. Fedd	erly		
First Name	Middle Name	Last Name	_
First Name	Middle Name	Last Name	_
ankruptcy Court for the:	DISTRICT OF MINNESOTA		_
19-30602			
			☐ Check if this is an amended filing
	Nicholas D. Fedd First Name First Name ankruptcy Court for the:	Micholas D. Fedderly First Name Middle Name First Name Middle Name Ankruptcy Court for the: DISTRICT OF MINNESOTA	Nicholas D. Fedderly First Name Middle Name Last Name First Name Middle Name Last Name Ankruptcy Court for the: DISTRICT OF MINNESOTA

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your a	
		Value	of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	213,100.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	50,430.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	263,530.0
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	258,740.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	24,946.0
	Your total liabilities	\$	283,686.00
Par	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,826.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,329.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a bousehold purpose "11 LLS C. & 101(8). Fill out lines 8-90 for statistical purposes. 28 LLS C. & 159		, family, or

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Page 2 of 42 Case number (if known) 19-30602 Debtor 1 Nicholas D. Fedderly

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11: OR . Form 122B Line 11: OR . Form 122C-1 Line 14.

6,915.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total o	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	4,218.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	4,218.00

	Case 19-30	602	Doc 5		03/11/19 cument	Entered 03/11/19 Page 3 of 42	9 16:22:08	Desc	: Main
Fill in this	information to ider	ntify you	r case and th			171111) (11 47			
Debtor 1	Nicholas	D. Fed	derly						
Debtor 2	First Name		Middle	e Name		Last Name			
(Spouse, if filing	ng) First Name		Middle	e Name		Last Name			
United Sta	tes Bankruptcy Cour	t for the:	DISTRICT	OF MIN	NESOTA				
Case num	ber 19-30602								Check if this is an amended filing
Scheon each cate think it fits be nformation.	est. Be as complete	Pro	ibe items. List rate as possibl	le. If two	married people	n asset fits in more than one are filing together, both are e top of any additional pages,	equally responsible	e for supp	lying correct
	Where is the property?								
1.1 7517	′ Carillon Plaza W	'_		What		? Check all that apply			
	address, if available, or othe		on		Single-family house or multing Condominium	Do not deduct secured claims or exemptions. Puthe amount of any secured claims on Schedule I Creditors Who Have Claims Secured by Property			
Woo	dbury M	IN 55	125-0000		Manufactured of Land	or mobile home	Current value of tentire property?	I	Current value of the portion you own?
City	St	ate	ZIP Code		Investment pro Timeshare	perty	\$213,100	0.00	\$213,100.00
					Other	in the property? Check one		ole, tenan	r ownership interest cy by the entireties, or
					Debtor 1 only				
County					Debtor 2 only Debtor 1 and D	Ophtor 2 only			
Í						the debtors and another	Check if this (see instructions		unity property
					-	ou wish to add about this item	, such as local		
					erty identificational description	on number: n: Lot 1, Block 2, Ridge	egate. Washing	aton Co	untv. MN
					4000111110	0t 1, D100K 2, Klugt	-gato, Hasiilii	,.o., oo	
						om Part 1, including any			\$213,100.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Page 4 of 42 Case number (if known) 19-30602 Debtor 1 Nicholas D. Fedderly 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Ram Make: Who has an interest in the property? Check one Do not deduct secured claims or exemptions. Put 1500 Crew Cab Sport the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. 4WD Debtor 1 only Model: 2011 Year: Debtor 2 only Current value of the Current value of the 160,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$13,000.00 \$13,000.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put 3.2 Make: GMC Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Acadia Limited AWD** Model: Debtor 1 only Creditors Who Have Claims Secured by Property. 2017 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$28,000.00 \$28,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$41,000,00 pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Miscellaneous bedroom furniture \$1,400.00 \$1,100.00 Miscellaneous household goods \$1,500.00 Miscellaneous living room furniture Washer & dryer \$600.00

Official Form 106A/B

\$300.00

Lawn mower

Case 19-30602 Doc 5 Filed 03/11/19 Entered 03/11/19 16:22:08 Desc Main Page 5 of 42 Case number (if known) 19-30602 Document Debtor 1 Nicholas D. Fedderly 7 Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... \$1,200.00 TV's & computer \$200.00 Cell phone 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$900.00 Miscellaneous wearing apparel Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$7,200.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

for Part 3. Write that number here

Current value of the portion you own? Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

		Case 19-30602	Doc 5	Filed 03/11/19 Document	Entered 03/11/19 16:22:08 Page 6 of 42	Desc Main
De	ebtor 1	Nicholas D. Fedderl	у		Page 6 of 42 Case number (if known)	19-30602
	☐ Yes					
				al accounts; certificates o counts with the same inst	f deposit; shares in credit unions, brokerage litution, list each.	houses, and other similar
				Institution n	ame:	
		17.1.		Checking	at Associated Bank	\$800.00
		17.2.		Savings a	t Carpenters Federal Credit Union	\$30.00
18.	_Examp	, mutual funds, or public bles: Bond funds, investme			ey market accounts	
	■ No □ Yes		Institution or i	ssuer name:		
19.		ublicly traded stock and	interests in i	ncorporated and uninco	orporated businesses, including an interes	st in an LLC, partnership, and
		Give specific information Nar	about them ne of entity:		% of ownership:	
	Negoti Non-ne ■ No	egotiable instruments are	ersonal check those you can	ks, cashiers' checks, pron	egotiable instruments nissory notes, and money orders. by signing or delivering them.	
21.		nent or pension account ples: Interests in IRA, ERIS		1(k), 403(b), thrift savings	s accounts, or other pension or profit-sharing	plans
		List each account separat Type	ely. of account:	Institution n	ame:	
22.	Your s Examp		s you have m		inue service or use from a company tric, gas, water), telecommunications compar	nies, or others
	■ No □ Yes.			Institution n	ame or individual:	
	Annuiti ■ No □ Yes	,	dic payment o		life or for a number of years)	
24.		ts in an education IRA, in C. §§ 530(b)(1), 529A(b),			gram, or under a qualified state tuition pro	ogram.
	■ No □ Yes	Institution r	name and des	cription. Separately file th	e records of any interests.11 U.S.C. § 521(c)	:
	Trusts, ■ No	, equitable or future inte	rests in prope	erty (other than anythin	g listed in line 1), and rights or powers exe	ercisable for your benefit
		Give specific information	about them			
		s, copyrights, trademark bles: Internet domain name				

☐ Yes. Give specific information about them...

Page 7 of 42 Case number (if known) 19-30602 Document Debtor 1 Nicholas D. Fedderly 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ☐ No Yes. Give specific information.. Unpaid wages \$1,400.00 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2,230.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property?

■ No. Go to Part 6.

Schedule A/B: Property

Official Form 106A/B

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	Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You figure on the second of the second	ou Own or Have an Interes	st In.	
46. I	Do you own or have any legal or equitable interest in any farm	n- or commercial fishir	ng-related property?	
	■ No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	ou Did Not List Above		
	Do you have other property of any kind you did not already lis Examples: Season tickets, country club membership	it?		
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$213,100.00
56.	Part 2: Total vehicles, line 5	\$41,000.00	_	
57.	Part 3: Total personal and household items, line 15	\$7,200.00		
58.	Part 4: Total financial assets, line 36	\$2,230.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$50,430.00	Copy personal property total	\$50,430.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$263,530.00

Official Form 106A/B Schedule A/B: Property page 6

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		12(7(3)111(3)11	1 11(1) / (1) - 2 /	
Fill in this info	rmation to identify your	case:		
Debtor 1	Nicholas D. Fedd	erly		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF MINNESOTA		
Case number	19-30602			
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the	Property You	ı Claim as E	xempt
---------	--------------	--------------	--------------	-------

☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)										
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)									
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.						
	7517 Carillon Plaza W. Woodbury, MN 55125	\$213,100.00		\$20,413.00	11 U.S.C. § 522(d)(1)					
	Legal description: Lot 1, Block 2, Ridgegate, Washington County, MN Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit						
	2011 Ram 1500 Crew Cab Sport 4WD 160,000 miles	\$13,000.00		\$1.00	11 U.S.C. § 522(d)(5)					
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit						
	2017 GMC Acadia Limited AWD Line from Schedule A/B: 3.2	\$28,000.00		\$1.00	11 U.S.C. § 522(d)(2)					
	Ellie Holli Geriedate 74 B. G.E			100% of fair market value, up to any applicable statutory limit						
	Miscellaneous bedroom furniture Line from Schedule A/B: 6.1	\$1,400.00		\$1,400.00	11 U.S.C. § 522(d)(3)					
	Line Irom Schedule AV.D. 4.1			100% of fair market value, up to any applicable statutory limit						
	Miscellaneous household goods Line from Schedule A/B: 6.2	\$1,100.00		\$1,100.00	11 U.S.C. § 522(d)(3)					
	Line from Schedule PVD. V.Z			100% of fair market value, up to any applicable statutory limit						

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Del	otor 1 Nicholas D. Fedderly	Document		Case number (if known)	19-30602
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Miscellaneous living room furniture	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)
	Ellio Holli Goriodalo 702.			100% of fair market value, up to any applicable statutory limit	
	Washer & dryer Line from Schedule A/B: 6.4	\$600.00		\$600.00	11 U.S.C. § 522(d)(3)
				100% of fair market value, up to any applicable statutory limit	
	Lawn mower Line from Schedule A/B: 6.5	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)
				100% of fair market value, up to any applicable statutory limit	
	TV's & computer Line from Schedule A/B: 7.1	\$1,200.00		\$1,200.00	11 U.S.C. § 522(d)(3)
	Ente nom Genedate A.B.			100% of fair market value, up to any applicable statutory limit	
	Cell phone Line from Schedule A/B: 7.2	\$200.00		\$200.00	11 U.S.C. § 522(d)(5)
	Ellio Holli Govicadio 702. 112			100% of fair market value, up to any applicable statutory limit	
Miscellaneous wearing apparel Line from Schedule A/B: 11.1		\$900.00		\$900.00	11 U.S.C. § 522(d)(3)
	Elle Helli Genedale / V.Z.			100% of fair market value, up to any applicable statutory limit	
	Checking at Associated Bank Line from Schedule A/B: 17.1	\$800.00		\$800.00	11 U.S.C. § 522(d)(5)
	Elle Holli Genedale A.B.			100% of fair market value, up to any applicable statutory limit	
	Savings at Carpenters Federal Credit Union	\$30.00		\$30.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.2				100% of fair market value, up to any applicable statutory limit	
Unpaid wages Line from Schedule A/B: 30.1		\$1,400.00		\$1,400.00	11 U.S.C. § 522(d)(5)
	Ellio Holli Goriodalo 702.			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 ■ No ■ Yes. Did you acquire the property covere ■ No	B years after that for ca	ses fi		
	□ Yes				

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	Document P	age 11	of 42		
Fill in this information to identify you	ır case:				
Debtor 1 Nicholas D. Fed	Iderly				
First Name		st Name		-	
Debtor 2					
(Spouse if, filing) First Name	Middle Name La	st Name		-	
United States Bankruptcy Court for the	: DISTRICT OF MINNESOTA				
	-			-	
Case number					
(if known)					if this is an
				ameno	led filing
Official Form 106D					
		_			
Schedule D: Creditors	s Who Have Claims Se	cured	by Propert	У	12/15
Be as complete and accurate as possible. is needed, copy the Additional Page, fill it number (if known).					
1. Do any creditors have claims secured by	y your property?				
☐ No. Check this box and submit t	his form to the court with your other sch	edules. You	u have nothing else t	to report on this form.	
Yes. Fill in all of the information	helow				
	below.				
Part 1: List All Secured Claims			Column A	Column B	Column C
	more than one secured claim, list the creditor s a particular claim, list the other creditors in F		Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in alphabeti		un 2. 710	Do not deduct the	that supports this	portion
2.1 City of Woodbury	Describe the property that secures the o	elaim:	value of collateral. \$640.00	claim \$213,100.00	If any \$0.00
Creditor's Name	7517 Carillon Plaza W. Woodbu		φ040.00	Ψ213,100.00	Ψ0.00
	MN 55125	, y,			
8301 Valley Creek Rd.	As of the date you file, the claim is: Chec apply.	k all that			
Saint Paul, MN 55125	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mort	gage or secu	red		
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	■ Statutory lien (such as tax lien, mechan	ic's lien)			
lacksquare At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)				
community debt					
Date debt was incurred 2018-19	Last 4 digits of account number	7000			
2.2 GM Financial	Describe the property that secures the o	claim:	\$39,539.00	\$28,000.00	\$11,539.00
Creditor's Name	2017 GMC Acadia Limited AWD				
	As of the date you file, the claim is: Chec	k all that			
P.O. Box 183621	apply.	k all triat			
Arlington, TX 76096-3621	Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
_	_				
☐ Debtor 1 only ☐ Debtor 2 only	 An agreement you made (such as morte car loan) 	gage or secu	red		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechan	vic's lion)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit	103 11011)			
☐ Check if this claim relates to a	☐ Other (including a right to offset)				
community debt	— Other (including a right to offset)				
August Date debt was incurred 2017	Last 4 digits of account number	2271			
Pare dent was illumed ZUII	Last + digits of account number				

Official Form 106D

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Debtor 1 Nicholas D. Fedderly First Name Middle N		ase number (if known)	19-30602	
First Name Middle N	lame Last Name			
2.3 GM Financial	Describe the property that secures the claim:	\$26,514.00	\$13,000.00	\$13,514.00
Creditor's Name	2011 Ram 1500 Crew Cab Sport 4WD			
P.O. Box 181145	As of the date you file, the claim is: Check all that			
Arlington, TX 76096	apply. □ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
, , , , , , , , , , , , , , , , , , , ,	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secu	ured		
☐ Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number 6214			
Minnesota Dept of				
Revenue	Describe the property that secures the claim:	\$1,610.00	\$213,100.00	\$0.00
Creditor's Name	7517 Carillon Plaza W. Woodbury,			
	MN 5512			
Bky Section	As of the date you file, the claim is: Check all that			
P.O. Box 64447	apply.			
St. Paul, MN 55164-0447	☐ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secu	ured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	■ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Date debt was incurred 2013 & 2017	Last 4 digits of account number 3805			
2.5 Prime Lending	Describe the property that secures the claim:	\$190,437.00	\$213,100.00	\$0.00
Creditor's Name	7517 Carillon Plaza W. Woodbury,	ψ130,431.00	Ψ213,100.00	Ψ0.00
	MN 55125			
18111 Preston Rd. Ste.				
900	As of the date you file, the claim is: Check all that apply.			
Dallas, TX 75252	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secu	ured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred July 2016	Last 4 digits of account number 6847			

Official Form 106D

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Debtor 1	Nicholas D.	Fedderly		Case number (if known)	19-30602
	First Name	Middle Name	Last Name		
Add the	dollar value of yo	our entries in Column A on t	this page. Write that number here:	\$258,740	.00
	s the last page of your name to the state of your state of the state o	your form, add the dollar val	lue totals from all pages.	\$258,740	.00
Part 2:	List Others to I	Be Notified for a Debt Th	at You Already Listed		
rying to han one	collect from you for creditor for any o	or a debt you owe to someo	one else, list the creditor in Part 1,	and then list the collection age	or example, if a collection agency is ncy here. Similarly, if you have more ional persons to be notified for any
	me, Number, Streetternal Revenu	et, City, State & Zip Code	0	n which line in Part 1 did you ente	er the creditor? 2.4
30	op 5700 E 7th St, Suit		Li	ast 4 digits of account number	-
St	. Paul, MN 55′	101-4940			

	Case 19-30002	Document Document	Page 14 of 42	08 Desc Main
Fill in thi	s information to identify you			
Debtor 1	Nicholas D. Fede	derly		
20010.	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, fi	lling) First Name	Middle Name	Last Name	
United St	ates Bankruptcy Court for the:	DISTRICT OF MINNESOTA		
Case nun	nber 19-30602			
(if known)				☐ Check if this is an
				amended filing
∩ #::	Form 400F/F			
	Form 106E/F	A/I - 11 11 1	Ola Laca	40/45
		Who Have Unsecured	Claims Y claims and Part 2 for creditors with NON	12/15
eft. Attach		age. If you have no information to rep	needed, copy the Part you need, fill it out, it ort in a Part, do not file that Part. On the to	
1. Do an	y creditors have priority unsecur	red claims against you?		
■ No	. Go to Part 2.			
□Ye	S.			
Part 2:	List All of Your NONPRIORI	ITY Unsecured Claims		
3. Do an	y creditors have nonpriority unse	ecured claims against you?		
□ No	. You have nothing to report in this	part. Submit this form to the court with y	your other schedules.	
■ Ye	S.			
unsec	ured claim, list the creditor separate ne creditor holds a particular claim,	ely for each claim. For each claim listed,	e creditor who holds each claim. If a creditor, identify what type of claim it is. Do not list clawave more than three nonpriority unsecured cl	ims already included in Part 1. If more aims fill out the Continuation Page of
				Total claim
	Affinity Plus Fed Credit Un	Last 4 digits of acco	ount number 5100	\$1,524.00
1	onpriority Creditor's Name 75 W Lafayette Frontage	Rd When was the debt	incurred? 2012	
	St. Paul, MN 55107 lumber Street City State Zlp Code	As of the date you f	ile, the claim is: Check all that apply	
	/ho incurred the debt? Check one	-	ile, the claim is. Check all that apply	
	Debtor 1 only	☐ Contingent		
_	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and a	_ '	ITY unsecured claim:	
_	At least one of the debtors and a Check if this claim is for a con			
	ebt		g out of a separation agreement or divorce th	at you did not
Is	the claim subject to offset?	report as priority clair		•
I	No	☐ Debts to pension	or profit-sharing plans, and other similar debt	S
] Yes	Other Specify	Personal Ioan	

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Page 15 of 42 Case number (if known) Debtor 1 Nicholas D. Fedderly 19-30602 4.2 \$896.00 Allina Health Last 4 digits of account number 3391 Nonpriority Creditor's Name P.O. Box 77008 When was the debt incurred? 2018 Minneapolis, MN 55480-7708 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical bill Other. Specify 4.3 Caine & Weiner Last 4 digits of account number 3393 \$122.00 Nonpriority Creditor's Name P.O. Box 55848 When was the debt incurred? 2017 Sherman Oaks, CA 91413 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Miscellaneous Other. Specify 4.4 Capital One Last 4 digits of account number 0463 \$382.00 Nonpriority Creditor's Name P.O. Box 30281 When was the debt incurred? 2017 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes

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Page 16 of 42 Case number (if known) Debtor 1 Nicholas D. Fedderly 19-30602 4.5 \$49.00 Colltech Inc. Last 4 digits of account number 9322 Nonpriority Creditor's Name P.O. Box 47095 When was the debt incurred? 2017 Plymouth, MN 55447-0095 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical bill Other. Specify 4.6 **Credit One Bank** \$602.00 Last 4 digits of account number 5429 Nonpriority Creditor's Name P.O. Box 60500 When was the debt incurred? 2017 City Of Industry, CA 91716-0500 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Credit card purchases** ☐ Yes Other. Specify 4.7 DirecManagement Last 4 digits of account number 8150 \$494.00 Nonpriority Creditor's Name P.O. Box 16243 When was the debt incurred? 2016 Mobile, AL 36616-0243 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical bill** Other. Specify

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Debtor 1 Nicholas D. Fedderly 19-30602 4.8 \$385.00 **Diversified Consultants, Inc** Last 4 digits of account number 9675 Nonpriority Creditor's Name P.O. Box 551268 When was the debt incurred? 2018 Jacksonville, FL 32255-1268 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Miscellaneous Other. Specify 4.9 **ERC** Last 4 digits of account number 1091 \$385.00 Nonpriority Creditor's Name P.O. Box 23870 When was the debt incurred? 2018 Jacksonville, FL 32241-3870 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Miscellaneous Other. Specify 4.1 **Healtheast Care System** \$1,899.00 Last 4 digits of account number Nonpriority Creditor's Name C/O Riverview Law Office, PLLC When was the debt incurred? 2016 P.O. Box 570 Sauk Rapids, MN 56379 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical bill

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Document Page 18 of 42 Debtor 1 Nicholas D. Fedderly ase number (if known) 19-30602 4.1 \$400.00 Healthpartners Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 77026 When was the debt incurred? 2017 Minneapolis, MN 55480-7726 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical bill ☐ Yes 4.1 **Kay Jewelers** 1129 \$4,362.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 740425 When was the debt incurred? 2015 Cincinnati, OH 45274-0425 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes 4.1 **Nelnet Loan Servicing** 4507 \$4.218.00 Last 4 digits of account number Nonpriority Creditor's Name 3015 S. Parker Rd. When was the debt incurred? 2016 Aurora, CO 80014 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No
□ Yes

☐ Other. Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

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Page 19 of 42 Case number (if known) Debtor 1 Nicholas D. Fedderly 19-30602 4.1 **Professional Recovery Person'I** 3154 \$195.00 Last 4 digits of account number Nonpriority Creditor's Name 6282 Douglas Ct. N. When was the debt incurred? 2018 Champlin, MN 55316 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Miscellaneous Other. Specify 4.1 **Regions Hospital** \$600.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Mail Stop 12403A When was the debt incurred? 2018 640 Jackson St St. Paul, MN 55101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill ☐ Yes 4.1 **Reliance Recoveries** 5413 \$566.00 6 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 29227 When was the debt incurred? 2018 Minneapolis, MN 55429-0227 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical bill ☐ Yes

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Page 20 of 42 Case number (if known) Debtor 1 Nicholas D. Fedderly 19-30602 4.1 **Resurgent Capital Services** 1129 \$4,362.00 Last 4 digits of account number Nonpriority Creditor's Name 726 Exchange Street, Ste 700 When was the debt incurred? 2017 Buffalo, NY 14210 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes 4.1 Valley Creek Family Dentistry 0002 \$1,043.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 9950 Valley Creek Rd. Ste. 200 When was the debt incurred? 2017 Woodbury, MN 55125 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical bill ☐ Yes 4.1 Verizon Wireless 0001 \$462.00 9 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 25505 When was the debt incurred? 2016 Lehigh Valley, PA 18002-5505 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Phone bill Other. Specify

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Xcel Energy	Last 4 digits of account number \$2,000.00
Nonpriority Creditor's Name P.O. Box 9477	When was the debt incurred? 2018-19
Minneapolis, MN 55484-94 Number Street City State Zlp Code Who incurred the debt? Check on	As of the date you file, the claim is: Check all that apply
■ Debtor 1 only	☐ Contingent
Debtor 2 only	□ Unliquidated
Debtor 1 and Debtor 2 only	□ Disputed
☐ At least one of the debtors and a	- ()()()()()()()()()()()()()()()()()()()
☐ Check if this claim is for a co	Charles
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Yes	Other. Specify Utility bill
5. Use this page only if you have others to is trying to collect from you for a debt yo	be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency but owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you he debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be not fill out or submit this page.
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Credit Collection Services	Line 4.3 of (Check one):
P.O. Box 55126	■ Part 2: Creditors with Nonpriority Unsecured Claims
Boston, MA 02205-5126	Last 4 digits of account number
Name and Address Dish Network P.O. Box 0063	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Palatine, IL 60055-0063	Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address Emergency Care Consultants	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.7 of (<i>Check one</i>):
P.O. Box 88087	■ Part 2: Creditors with Nonpriority Unsecured Claims
Chicago, IL 60680-1087	· · ·
	Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Healtheast Care System P.O. Box 77042	Line 4.10 of (Check one):
Minneapolis, MN 55480-7742	■ Part 2: Creditors with Nonpriority Unsecured Claims
, , , , , , , , , , , , , , , , , , , ,	Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Healtheast Medical Transp.	Line 4.10 of (Check one):
NW 7205	Part 2: Creditors with Nonpriority Unsecured Claims
P.O. Box 1450	
Minneapolis, MN 55485-7205	Last 4 digits of account number
	<u> </u>
Name and Address Kay Jewelers	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.12 of (<i>Check one</i>):
P.O. Box 4485	Part 2: Creditors with Nonpriority Unsecured Claims
Beaverton, OR 97076	
	Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Progressive	Line 4.3 of (Check one):
Dept. 0561	■ Part 2: Creditors with Nonpriority Unsecured Claims
Carol Stream, IL 60132-0561	Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?

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Debtor 1 Nicholas D. Fedderly

Resurgent Capital Services P.O. Box 10497 Greenville, SC 29603

Line 4.17 of (Check one):

19-30602

☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 4,218.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 20,728.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 24,946.00

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		17(7(.1111(.111	1 7MM . 7 .3 (M 47	
Fill in this infor	mation to identify your	case:		
Debtor 1	Nicholas D. Fedd	lerly		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MINNESOTA		
Case number	19-30602			
(if known)				☐ Check if this is a

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	=
2.3	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	•				

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		Documen	<u>t Pade 24 ot</u>	47	
Fill in this infor	mation to identify your	case:			
Debtor 1	Nicholas D. Fedd	erly			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF MINNESO	ГА		
Case number	19-30602				
(if known)					☐ Check if this is an amended filing
Official Fo	orm 106H				
Schedule	H: Your Cod	ebtors			12/15
	,	. Answer every question. you are filing a joint case, do	not list either spouse a	s a codebtor.	
		lived in a community prop Nevada, New Mexico, Puer			es and territories include
■ No. Go to		use, or legal equivalent live v	vith you at the time?		
in line 2 aga	ain as a codebtor only i), Schedule E/F (Official	f that person is a guaranto	r or cosigner. Make su	are you have listed the cre	n you. List the person shown ditor on Schedule D (Official dule E/F, or Schedule G to fill
	nn 1: Your codebtor Number, Street, City, State and Z	P Code		Column 2: The creditor Check all schedules that	to whom you owe the debt apply:
7517	ica Wilbanks Carillon Plaza W. dbury, MN 55125			■ Schedule D, line □ Schedule E/F, line _ □ Schedule G GM Financial	

Schedule H: Your Codebtors

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	in this information to identify your of the Nicholas D.										
	- THORIGING DI	readerly				-					
	otor 2 buse, if filing)					_					
Uni	ted States Bankruptcy Court for the	e: DISTRICT OF MINNE	SOTA			_					
	se number 19-30602						Check i	f this is:			
(If kr	nown)							amende	_		tion obsertor
										ng postpeti following d	tion chapter ate:
0	fficial Form 106I						MM	/ DD/ Y	YYY		
S	chedule I: Your Inc	ome									12/15
	t 1: Describe Employment Fill in your employment			•							
	information.		Debto					_		filing spou	se
	If you have more than one job, attach a separate page with	Employment status		Employed			_	■ Emplo	•		
	information about additional employers.		☐ Not employed			☐ Not employed					
	Include part-time, seasonal, or	Occupation	Carpo	enter				CNA			
	self-employed work.	Employer's name	JSH (Construction	on			Allina			
	Occupation may include student or homemaker, if it applies.	Employer's address	Howa	ard Lake, N	IN		Н	lasting	s, MN		
		How long employed t	here?	3 week	s			_1	year		
Par	Give Details About Mo	nthly Income									
	mate monthly income as of the duse unless you are separated.	late you file this form. If	you have	e nothing to re	eport for	any I	ine, write \$	0 in the	space. Ir	iclude your	non-filing
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine th	ne information	n for all e	emplo	yers for the	at perso	n on the	lines below	. If you need
							For Debto	or 1		ebtor 2 or ling spous	ie_
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$	6,1	18.00	\$	1,800.	00
3.	Estimate and list monthly over	time pay.			3.	+\$		0.00	+\$	0.	00

Calculate gross Income. Add line 2 + line 3.

6,118.00

1,800.00

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Deb	tor 1	Nicholas D. Fedderly	-	(Case i	number (<i>if kr</i>	nown)	19-30)602		
	Cor	by line 4 here	4.		For \$	Debtor 1 6,118	2 00		Debtor 2		
			٦.		Ψ_	0,110	5.00	Ψ	1,0	300.00	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a		\$	1,027		\$		125.00	_
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	\$		0.00	_
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c 5d		\$ _		0.00	\$		0.00	_
	5u. 5e.	Insurance	5e		\$ _		0.00	\$ 		0.00	_
	5f.	Domestic support obligations	5f.		\$		0.00	\$		0.00	_
	5g.	Union dues	5g		<u>\$</u> —		0.00	\$_		0.00	_
	5h.	Other deductions. Specify: Vacation Fund	5h		\$			+ \$		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	2,022	2.00	\$	4	125.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	4,096	6.00	\$	1,3	375.00	_
8.	List 8a.	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						•			
	O.L.	monthly net income.	8a		\$		0.00	\$		0.00	_
	8b.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8b).	\$		0.00	\$		0.00	_
	8c.	regularly receive									
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c		\$	(0.00	\$	•	225.00	
	8d.		8d		\$ —		0.00	\$		0.00	_
	8e.	Social Security	8e		\$		0.00	\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$		0.00	\$		0.00	_
	8g.	Pension or retirement income	8g		\$		0.00	\$		0.00	_
	8h.	Other monthly income. Specify: VA disability	8h	1.+	\$	130	0.00	+ 5		0.00	-
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		130	0.00	\$		225.0	0
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		1,226.00	+ \$	1.6	00.00	= \$	5,826.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				,					0,02000
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not ecify:	depe						chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certain lies							12.	\$	5,826.00
12	Do	you expect an increase or decrease within the year after you file this form	2							month	ly income
13.	=	you expect an increase or decrease within the year after you file this form No.	•								
	_	Yes, Explain:									

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Fill in	this informa	tion to identify yo	nr case.			Ì				
Debto	or 1	Nicholas D. F	edderly			Ch		if this is: n amended filing		
Debto							Α	supplement show	wing postpetition chapte	er
(Spou	use, if filing)						13	B expenses as of	the following date:	
United	d States Bankr	uptcy Court for the:	DISTRI	CT OF MINNESOTA			М	M / DD / YYYY		
Case	number 19	-30602								
(If kno	own)									
Off	ficial Fo	rm 106J								
		J: Your E	Exper	ISAS					1	2/1
Be as infor num	s complete a mation. If m ber (if know	and accurate as ore space is nee n). Answer ever	possible. eded, atta y question	. If two married people a ch another sheet to this	re filing together, b form. On the top of	oth are ed any addi	quall	y responsible fo al pages, write y	or supplying correct	
Part 1	1: Descr Is this a join	ibe Your Housel	hold							
	■ No. Go to									
		s Debtor 2 live i	n a separa	ate household?						
	□ N	0								
	☐ Ye	es. Debtor 2 mus	t file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	ehold of De	ebtor	2.		
2.	Do you have	e dependents?	□ No							
	Do not list Do Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati			Dependent's age	Does dependent live with you?	
	Do not state	the							□ No	
	dependents	names.			Children		_	8	■ Yes □ No	
					Children			10	■ Yes	
									□ No	
									☐ Yes	
									□ No □ Yes	
		enses include		No			_		— 103	
		f people other th d your depender	nan 👝	Yes						
expe	nate your ex		ur bankrı	y Expenses uptcy filing date unless y is filed. If this is a sup						
the v	alue of such	n assistance and		government assistance cluded it on <i>Schedule I:</i>				v		
(Offic	cial Form 10	6I.)						Your exp	enses	
		r home ownersh and any rent for the		ses for your residence. r lot.	Include first mortgage	e 4.	\$		1,430.00	
	If not includ	ed in line 4:								
	4a. Real e	state taxes				4a.	\$		0.00	
		rty, homeowner's	, or renter	's insurance		4b.	\$		0.00	
				upkeep expenses		4c.	-		0.00	
		owner's associati nortgage pavme		dominium dues Dur residence, such as ho	ome equity loans	4d. 5.	\$		120.00 0.00	

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Debtor 1 Nicholas	D. Fedderly	Case num	ber (if known)	19-30602
6. Utilities:				
	neat, natural gas	6a.	\$	250.00
•	er, garbage collection	6b.	\$	90.00
	cell phone, Internet, satellite, and cable services	6c.	·	280.00
6d. Other. Spec	•	6d.		0.00
7. Food and housel		7.	·	950.00
	ildren's education costs	7. 8.	\$	
				450.00
•	y, and dry cleaning	9.	\$	150.00
10. Personal care pro		10.		175.00
11. Medical and dent	•	11.	\$	150.00
	nclude gas, maintenance, bus or train fare.	12.	2	325.00
Do not include car	1 /		·	
	lubs, recreation, newspapers, magazines, and books	13.		125.00
	butions and religious donations	14.	\$	0.00
5. Insurance.	urongo dodugted from your new or included in lines 4 or 00			
15a. Life insuran	urance deducted from your pay or included in lines 4 or 20.	15a.	¢	0.00
			·	0.00
15b. Health insur		15b.	·	0.00
15c. Vehicle insu		15c.		220.00
15d. Other insura		15d.	\$	0.00
	lude taxes deducted from your pay or included in lines 4 or 20.		_	
Specify:		16.	\$	0.00
7. Installment or lea			•	
17a. Car paymer		17a.		614.00
17b. Car paymer	nts for Vehicle 2	17b.	\$	0.00
17c. Other. Spec	cify:	17c.	\$	0.00
17d. Other. Spec	cify:	17d.	\$	0.00
8. Your payments o	of alimony, maintenance, and support that you did not report a			
	our pay on line 5, Schedule I, Your Income (Official Form 106I)). 18.	\$	0.00
Other payments ;	you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	rty expenses not included in lines 4 or 5 of this form or on Sc			
20a. Mortgages	on other property	20a.	\$	0.00
20b. Real estate	taxes	20b.	\$	0.00
20c. Property, ho	omeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenanc	e, repair, and upkeep expenses	20d.	\$	0.00
	r's association or condominium dues	20e.	\$	0.00
Other: Specify:		21.	·	0.00
Gillon Opcony.			· Ψ	0.00
2. Calculate your m	onthly expenses			
22a. Add lines 4 th	nrough 21.		\$	5,329.00
22b. Copy line 22	(monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$	· .
	and 22b. The result is your monthly expenses.		\$	5,329.00
220. 7 GG III O 22G	and 112. The result to your menting expenses.			3,323.00
3. Calculate your m	onthly net income.			
23a. Copy line 12	2 (your combined monthly income) from Schedule I.	23a.	\$	5,826.00
	monthly expenses from line 22c above.	23b.	-\$	5,329.00
[7 7	, .			0,020.00
23c. Subtract voi	ur monthly expenses from your monthly income.			
	s your monthly net income.	23c.	\$	497.00
	n increase or decrease in your expenses within the year after			
	expect to finish paying for your car loan within the year or do you expect yo	our mortgage p	payment to incre	ease or decrease because o
	erms of your mortgage?			
No.				
☐ Yes.	Explain here:			

Fill in this info	ormation to identify your	case:			
Debtor 1	Nicholas D. Fedd	erlv			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	DISTRICT OF MINNESOTA			
Case number	19-30602				
(if known)					☐ Check if this is an amended filing
	rm 106Dec	on Individual D	abtaula Cabaa	Jula a	
Declara	s Juoda noiti	ın Individual D	eptor's Sched	auies	12/15
obtaining mon- years, or both.		le bankruptcy schedules or a n connection with a bankrupt 519, and 3571.			
Did you p	pay or agree to pay some	one who is NOT an attorney	to help you fill out bankruլ	otcy forms?	
■ No					
☐ Yes.	Name of person				y Petition Preparer's Notice, Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the summary	y and schedules filed with	this declaration and	I
X /s/ Ni	cholas D. Fedderly		X		
Nicho	olas D. Fedderly ture of Debtor 1		Signature of Debtor	2	

Date

Date March 7, 2019

Fill in	this inforr	nation to identify you	r case:			
Debto	r 1	Nicholas D. Fede	derly			
Dalata	0	First Name	Middle Name	Last Name		
Debto (Spouse	r 2 if, filing)	First Name	Middle Name	Last Name		
United	l States Ba	nkruptcy Court for the:	DISTRICT OF MINNESO	TA		
Case	number '	19-30602				
(if knowr	_	19-30002				Check if this is an mended filing
Stat	ement		Affairs for Individ			4/10
nform	ation. If m		attach a separate sheet to		equally responsible for sup additional pages, write you	
Part 1	Give D	Details About Your Ma	rital Status and Where You	Lived Before		
I. W	hat is you	r current marital statu	ıs?			
	Married Not mai					
2. Di	uring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	l Na					
	l No l Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now		
D	ebtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territor co, Texas, Washington and V	
	l No l Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Of	ificial Form 106H).		
Part 2	Explai	n the Sources of You	r Income			
Fi	ll in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	l No					
	Yes. Fil	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,825.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Nicholas D. Fedderly

Debtor				Debtor 1		Debtor 2				
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)		
	r last calen anuary 1 to	dar year: December	31, 2018)	■ Wages, commissions, bonuses, tips	\$61,500.00	☐ Wages, components with the Wages, tips	missions,			
				☐ Operating a business		☐ Operating a b	ousiness			
5.	Include include and other winnings. List each s	come regard public benef If you are fili	lless of wheth fit payments; ing a joint cas the gross inco	e during this year or the two ner that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separat	amples of other income are a rest; dividends; money collec- you received together, list it co	ted from lawsuits; renly once under De	royalties; an ebtor 1.			
				Debtor 1		Debtor 2				
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.		Gross income (before deductions and exclusions)		
Pa	rt 3: List	Certain Pa	yments You	Made Before You Filed for	Bankruptcy					
6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? □ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurre individual primarily for a personal, family, or household purpose." □ During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amour paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. A not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. ■ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. □ During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. ■ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do reinclude payments for domestic support obligations, such as child support and alimony. Also, do not include payments for this bankruptcy case.							the total amount you and alimony. Also, do t.			
	Creditor'	s Name and	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this	payment for		
GM Financial P.O. Box 183621 Arlington, TX 76096-3621				2019	\$1,228.00	\$39,539.00	☐ Mortgage■ Car☐ Credit Card			

 \square Loan Repayment ☐ Suppliers or vendors

☐ Other__

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7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.										
	☐ Yes. List all payments to an insider.										
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment					
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No		ments or transfer a	nny property on a	account of a d	ebt that benefited an					
	☐ Yes. List all payments to an insider										
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment ditor's name					
Por	t 4: Identify Legal Actions, Repossession	as and Faraslasuras									
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title	cy, were you a party in an				rt or custody					
	Case number	Nature of the case	Court or agency		Status of th	ile Case					
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address			oreclosed, garni		d, seized, or levied? Value of the property					
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.		luding a bank or fir	nancial institutio	n, set off any	amounts from your					
	Creditor Name and Address	Describe the action the	creditor took	Date take	action was	Amount					
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess			efit of creditors, a					
Par	List Certain Gifts and Contributions										
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gifts	s with a total value	of more than \$6	00 per person	?					
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date the	es you gave gifts	Value					
	Person to Whom You Gave the Gift and Address:										

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14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No									
	☐ Yes. Fill in the details for each gift or contrib Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value						
Par	t 6: List Certain Losses									
15.	. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other or gambling?									
	■ No □ Yes. Fill in the details.									
	how the loss occurred Inclu	cribe any insurance coverage for the ledge the amount that insurance has paid. Ledge claims on line 33 of Schedule A/B:	ist pending loss	Value of property lost						
Par	t 7: List Certain Payments or Transfers		, ,							
16.	Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepared include any attorneys, bankruptcy petition prepared No Yes. Fill in the details. Person Who Was Paid Address	ring a bankruptcy petition?	vices required in your bankruptcy	Amount of						
	Email or website address Person Who Made the Payment, if Not You	made	payment							
	Schreiber Law Office		February 2019	\$310.00						
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you I No	or to make payments to your creditor		perty to anyone who						
	Yes. Fill in the details. Person Who Was Paid Address	Description and value of any prop transferred	erty Date payment or transfer was made	Amount of payment						
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affairs? e as security (such as the granting of a s								
	Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made						
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.									
	Name of trust	of trust Description and value of the property transferred								

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Debtor 1 Nicholas D. Fedderly

Par	t 8:	List of Certain Financial Accounts, In	strun	nents, Safe Depos	sit Boxes, and St	orage Unit	ts							
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.													
		No												
		Yes. Fill in the details.												
		me of Financial Institution and dress (Number, Street, City, State and ZIP le)		st 4 digits of count number	Type of account instrument	unt or	Date account was closed, sold, moved, or transferred		Last balance before closing or transfer					
21.		Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?												
		No Yes. Fill in the details.												
		me of Financial Institution dress (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number State and ZIP Code)		Describe	the contents		Do you still have it?					
22.	Hav	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?												
 		No Yes. Fill in the details.												
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)			Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	the contents		Do you still have it?					
Par	t 9:	Identify Property You Hold or Contro	l for S	Someone Else										
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.													
		No Yes. Fill in the details.												
	_	/ner's Name dress (Number, Street, City, State and ZIP Code)		Where is the pro (Number, Street, City Code)		Describe	the property		Value					
Par	t 10:	Give Details About Environmental Inf	forma	ition										
For	the p	ourpose of Part 10, the following definit	ions a	apply:										
	toxi	rironmental law means any federal, state ic substances, wastes, or material into t ulations controlling the cleanup of thes	the ai	r, land, soil, surfa	ce water, ground									
		e means any location, facility, or propert own, operate, or utilize it, including disp	-		environmental l	aw, wheth	er you now own, operate	э, о	r utilize it or used					
		tardous material means anything an env ardous material, pollutant, contaminant			s as a hazardous	waste, ha	zardous substance, toxi	C SI	ubstance,					
Rep	ort a	III notices, releases, and proceedings th	nat yo	u know about, re	gardless of when	they occu	urred.							
24.	Has	any governmental unit notified you tha	at you	may be liable or	potentially liable	under or i	n violation of an environ	me	ntal law?					
	_	No												
		Yes. Fill in the details.												
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental u Address (Number, ZIP Code)	nit Street, City, State and		onmental law, if you it		Date of notice					

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Debtor 1	Nicholas D. Fedderly	Document	Page 35 of 42 Case number (if known)	19-30602

25. Have you notified any governmental unit of any release of hazardous material?														
	No													
	Yes. Fill in the details.													
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice										
26.	Have you been a party in any judicial or adm	inistrative proceeding under any envi	ronmental law? Include settlements a	and orders.										
	■ No □ Yes. Fill in the details.													
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case										
Par	Part 11: Give Details About Your Business or Connections to Any Business													
27.	Within 4 years before you filed for bankrupto	cy, did you own a business or have an	y of the following connections to any	business?										
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time											
	☐ A member of a limited liability compa	any (LLC) or limited liability partnershi	p (LLP)											
	☐ A partner in a partnership													
	☐ An officer, director, or managing exe	ecutive of a corporation												
	☐ An owner of at least 5% of the voting	or equity securities of a corporation												
	■ No. None of the above applies. Go to Part 12.													
	Yes. Check all that apply above and fill in the details below for each business.													
	Business Name	Describe the nature of the business	Employer Identification number											
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security	ess existed										
28.	Within 2 years before you filed for bankruptoinstitutions, creditors, or other parties. ■ No □ Yes. Fill in the details below.	ey, did you give a financial statement t		ide all financial										
	Name	Date Issued												
	Address (Number, Street, City, State and ZIP Code)													
Par	12: Sign Below													
are t	e read the answers on this <i>Statement of Fina</i> rue and correct. I understand that making a fa bankruptcy case can result in fines up to \$ S.C. §§ 152, 1341, 1519, and 3571.	alse statement, concealing property, o	or obtaining money or property by fra											
Nic	licholas D. Fedderly nolas D. Fedderly lature of Debtor 1	Signature of Debtor 2												
Date	March 7, 2019	Date												
Did y ■ N □ Y		nt of Financial Affairs for Individuals F	illing for Bankruptcy (Official Form 10	07)?										
Did y ■ N	ou pay or agree to pay someone who is not	an attorney to help you fill out bankru	ptcy forms?											
	es. Name of Person Attach the <i>Bankrup</i> Il Form 107 Stateme	otcy Petition Preparer's Notice, Declaration ent of Financial Affairs for Individuals Filing		page 6										

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Debtor 1 Nicholas D. Fedderly

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LOCAL FORM 1007-1 REVISED 06/16

United States Bankruptcy Court District of Minnesota

In re	Nicholas D. Fedderly					Case No.	19-	30602	
		Debto	r(s)			Chapter	13		
	DISCLOSURE OF COM	MPENSATION (OF.	A	TTORNEY	FOR D	ЕВТ	OR	
paid to	Pursuant to 11 U.S.C. § 329(a) and Fe (s) and that compensation paid to me with me, for services rendered or to be rendered to the captcy case is as follows:	thin one year befor	e the	e f	filing of the p	etition in	bankı	ruptcy, or agreed to b	e
Prior	egal Services, I have agreed to accept to the filing of this statement I have rece ace Due	ived	\$ \$ \$		3,310.00 310.00 3,000.00				
	the source of the compensation paid to m ■ Debtor □)						
	he source of the compensation to be paid Debtor)						
	I I have not agreed to share the above-dates of my law firm.	isclosed compensa	tion	ιV	vith any othe	r person u	ınless	they are members a	nd
associ	I have agreed to share the above-discle ates of my law firm. A copy of the agre mpensation, is attached.								
	In return for the above-disclosed fee, to ed by 11 U.S.C. §528(a)(1), I have agree	•							act
	A. Analysis of the debtor's financial situetition in bankruptcy;	nation, and rendering	ng a	ıd	vice to the d	ebtor in d	eterm	nining whether to file	a
I	3. Preparation and filing of any petition,	schedules, statemer	nts o	of	affairs and pl	an which	may l	be required;	
	C. Representation of the debtor at the mereof;	neeting of creditors	s and	d	confirmation	hearing,	and a	any adjourned hearir	ıgs
Ι	D. Representation of the debtor in contest	ed bankruptcy mat	ters;	; a	and				
I	E. Other services reasonably necessary to	represent the debte	or(s)).					

CERTIFICATION

6. Pursuant to Local Rules 1007-1 and 1007-3-1, I have advised the debtor of the requirements in the Statement of Financial Affairs to disclose all payments made, or property transferred, by or on behalf of the debtor to any person, including attorneys, for consultation concerning debt consolidation or reorganization, relief under bankruptcy law, or preparation of a petition in bankruptcy. I have reviewed the debtor's disclosures and they are accurate and complete to the

best of my knowledge.

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LOCAL FORM 1007-1 REVISED 06/16

I certify that the foregoing, together with the written contract required by 11 U.S.C. §528(a)(1), is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy case.

Dated: March 7, 2019
Signature of Attorney
/s/ Richard M. Schreiber
Richard M. Schreiber 027057X (MN)

Fill in this information to identify your case:							
Debtor 1	Nicholas D. Fedderly						
Debtor 2 (Spouse, if filing)							
United States B	United States Bankruptcy Court for the: District of Minnesota						
Case number (if known)	19-30602						

Check as directed in lines 17 and 21:									
According to the calculations required by this Statement:									
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).								
	Disposable income is determined under 11 U.S.C. § 1325(b)(3).								
	3. The commitment period is 3 years.								
	4. The commitment period is 5 years.								

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. ☐ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 4.890.00 1,800.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 225.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

\$

Net monthly income from rental or other real property

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Document Page 40 of 42 Nicholas D. Fedderly 19-30602 Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you_____ 0.00 For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10, Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 4,890.00 2,025.00 6,915.00 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 6.915.00 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 6,915.00 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 6.915.00 15a. Copy line 14 here=>

15b. The result is your current monthly income for the year for this part of the form.

Multiply line 15a by 12 (the number of months in a year).

x 12

82,980.00

Case 19-30602 Doc 5 Filed 03/11/19 Entered 03/11/19 16:22:08 Desc Main Document Page 41 of 42 Nicholas D. Fedderly 19-30602 Debtor 1 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: MN 16a. Fill in the state in which you live. 16b. Fill in the number of people in your household. 4 16c. Fill in the median family income for your state and size of household. 109.211.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. 6,915.00 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 6,915.00 \$ 19b. Subtract line 19a from line 18.

20.	Calculate your current monthly income for the year. Follow these steps:		
	20a. Copy line 19b	\$_	6,915.00
	Multiply by 12 (the number of months in a year).	>	(12
	20b. The result is your current monthly income for the year for this part of the form	\$_	82,980.00

20c. Copy the median family income for your state and size of household from line 16c \$ 109,211.00

21. How do the lines compare?

- Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.
- Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ Nicholas D. Fedderly

Nicholas D. Fedderly

Signature of Debtor 1

Date March 7, 2019

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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NO NEW CREDITORS